

**STATE OF WEST VIRGINIA
DIVISION OF MOTOR VEHICLES
MOTOR CARRIER SERVICES
CHARLESTON 25317**

FOR DEPARTMENT USE ONLY

CLASS BA:

Application for a Certificate of Title for a Motor Vehicle

TYPE OR PRINT IN BLUE OR BLACK INK

MAKE CHECKS PAYABLE TO DIVISION OF MOTOR VEHICLES

The owner(s) of the following vehicle make application for a certificate of title for that vehicle and for that purpose state the following:

NAME _____
(Name of purchaser to be written plainly and exactly as it is to appear on the Certificate of Title)

MAILING ADDRESS _____
Number Street City or Town County State Zip Code

VEHICLE DESCRIPTION

MAKE _____ YEAR _____ V. I. N. _____

STYLE OF BODY _____ WEIGHT _____ TRUCKS Requested (GVW) _____

Title Brands: ☐ SALVAGE ☐ RECONSTRUCTED ☐ OTHER: _____

Purchase Price \$ _____ Trade-in \$ _____ Net Cost \$ _____ 5% Sales Tax _____
(Credit allowed only on vehicles registered in West Virginia and the tax paid thereon by applicant)

TRADE-IN DESCRIPTION

1) _____
MAKE YEAR SERIAL NO. WEST VIRGINIA TITLE NUMBER

LIENS AND ENCUMBRANCES

1	Name _____	Amount _____
	Mailing Address _____ Street City State Zip Code	
	Kind of Lien _____	Date _____
	C/S/C D/T S/A	
2	Name _____	Amount _____
	Mailing Address _____ Street City State Zip Code	
	Kind of Lien _____	Date _____
	C/S/C D/T S/A	

I hereby state that there is a motor vehicle liability policy in effect on the described vehicle in accordance with the provisions of the West Virginia Motor Vehicle Laws and certify that the statements made are true and correct to the best of my knowledge and belief under penalty of false swearing. West Virginia Motor Vehicle Law § 17A-9-1 : Fraudulent Applications.

Effective date of insurance policy: From _____ To _____
Name of Insurance Company _____
Name of Insurance Agent _____
Insurance Policy Number _____

TITLE APPLICATION MUST BE SIGNED BY OWNER

If Title reads "AND" Both Signatures of Owners Must Appear

OWNER'S SIGNATURE _____

OWNER'S SIGNATURE _____

INSURANCE MUST BE IN EFFECT WHEN APPLICATION RECEIVED.

DEALER CERTIFICATION

This is to certify that the above described vehicle was acquired from _____ on month _____ day _____ year _____ and sold to the above named purchaser on month _____ day _____ year _____.

The undersigned dealer further Certifies that the sale price, trade-in and net cost are true and correct and that the Federal Odometer Regulation has been satisfied. Federal Regulations Require you to State the Odometer Mileage Upon Transfer of Ownership.

I certify to the best of my knowledge that the odometer reading is _____ and reflects the actual mileage of the vehicle unless one of the following statements is checked:

- ☐ 1. Mileage stated is in excess of its mechanical limits.
☐ 2. The odometer reading is not the actual mileage - **WARNING-ODOMETER DISCREPANCY.**

Dealer Name _____
Address _____
Signature (X) _____
Dealer Number _____

INFORMATION

Print in ink or type

Mail check or money order
Make payable to DMV

DO NOT MAIL CASH

Any check that is not honored for payment will result in a \$10.00 service charge.

Be certain you have completed the application, including your signature.

If the vehicle is titled in another state, the title must accompany this application.

All titles with liens are mailed directly to the lienholder.

Be sure to include your Zip Code and Zip Code of lienholder.

Statement of insurance must be submitted with each application for motor vehicle registration.

FEES

\$10.00 for title

\$ _____

\$5.00 for lien

\$ _____

5% Sales Tax (Over 55,000 lbs. Exempt)

\$ _____

TOTAL

\$ _____

* Credit on trade-in allowed only for vehicles registered in West Virginia and taxes paid thereon by applicant.

For additional information call 304-558-4448, 304-558-3629, or toll-free 1-800-642-9066

Mail to:

**Motor Carrier Services
Division of Motor Vehicles
PO Box 17900
Charleston, West Virginia 25317**